

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	2/4
O.I.P.E. CLASSIFIER		48	2/22/00
FORMALITY REVIEW	PA	69916	4/12/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	8/19/00	
2	✓	8/19/00	
3	o	8/19/00	
4	✓	8/19/00	
5	o	8/19/00	
6	o	8/19/00	
7	✓	8/19/00	
8	✓	8/19/00	
9	o	8/19/00	
10	✓	8/19/00	
11	✓	8/19/00	
12	✓	8/19/00	
13	o	8/19/00	
14	o	8/19/00	
15	✓	8/19/00	
16	✓	8/19/00	
17	o	8/19/00	
18	✓	8/19/00	
19	✓	8/19/00	
20	o	8/19/00	
21	o	8/19/00	
22	o	8/19/00	
23	o	8/19/00	
24	✓	8/19/00	
25	✓	8/19/00	
26	✓	8/19/00	
27	✓	8/19/00	
28	o	8/19/00	
29	✓	8/19/00	
30	✓	8/19/00	
31	o	8/19/00	
32	✓	8/19/00	
33	o	8/19/00	
34	o	8/19/00	
35	o	8/19/00	
36	o	8/19/00	
37	✓	8/19/00	
38	✓	8/19/00	
39	✓	8/19/00	
40	o	8/19/00	
41	✓	8/19/00	
42	o	8/19/00	
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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